Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| 10 | 757 | C74 |
|----|-----|-----|
| UU | 15/ | 7/1 |

| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                        |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  | SMALL ENTITY TYPE |            |                                                  | OTHER THAN OR SMALL ENTITY |            |                        |  |
|---------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|----------------------------------------|-----------------------------------|---------------------|------------------|-------------------|------------|--------------------------------------------------|----------------------------|------------|------------------------|--|
| TOTAL CLAIMS                                                                          |                                                                                                                                                                                                                                                                                                                     |                                           | 3                                      |                                   | 100.0               |                  |                   | RATE       | FEE                                              | <b>1</b>                   | RATE       | FEE                    |  |
| FOR                                                                                   |                                                                                                                                                                                                                                                                                                                     |                                           | NUMBER FILED                           |                                   | NUMBER EXTRA        |                  | Ì                 | BASIC FEE  | +                                                | OR                         | BASIC FEE  | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS                                                               |                                                                                                                                                                                                                                                                                                                     |                                           | 2 mir                                  | nus 20=                           | * (                 | )                |                   | X\$ 9=     | <u>†                                      </u>   | OR                         | X\$18=     |                        |  |
| INDEPENDENT CLAIMS                                                                    |                                                                                                                                                                                                                                                                                                                     |                                           | <i>1</i> mi                            | nus 3 =                           | * 0                 |                  |                   | X43=       | <del>                                     </del> | 1                          | X86=       |                        |  |
| MULTIPLE DEPENDENT CLAIM PR                                                           |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  |                   | 743=       | <u> </u>                                         | OR                         | 700-       |                        |  |
| L                                                                                     | 4b = diff======                                                                                                                                                                                                                                                                                                     | in column 1 in                            | loca than zero, optor "O" in column O  |                                   |                     | İ                | +145=             |            | OR                                               | +290=                      |            |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  | TOTAL             | <u></u>    | OR                                               | TOTAL                      | 770        |                        |  |
|                                                                                       |                                                                                                                                                                                                                                                                                                                     | (Column 1)                                | MENDED - PART II (Column 2) (Column 3) |                                   |                     | SMALL ENTITY     |                   |            | OR                                               | OTHER<br>SMALL I           |            |                        |  |
| AMENDMENT A                                                                           |                                                                                                                                                                                                                                                                                                                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                        | HIGH<br>NUME<br>PREVIC<br>PAID I  | BER<br>OUSLY        | PRESENT          |                   | RATE       | ADDI-<br>TIONAL<br>FEE                           |                            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
| NDW                                                                                   | Total                                                                                                                                                                                                                                                                                                               | *                                         | Minus                                  | **                                |                     | =                |                   | X\$ 9=     |                                                  | OR                         | X\$18=     |                        |  |
| AME                                                                                   | Independent                                                                                                                                                                                                                                                                                                         | *                                         | Minus                                  |                                   |                     | = .              |                   | X43=       |                                                  | OR                         | X86=       |                        |  |
|                                                                                       | FIRST PRESE                                                                                                                                                                                                                                                                                                         | NTATION OF MU                             | JLTIPLE DEF                            | PENDENT                           | CLAIM               |                  | 1                 | +145=      |                                                  | OR                         | +290=      |                        |  |
|                                                                                       |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  | İ                 | TOTAL      |                                                  |                            | TOTAL      |                        |  |
| (Column 1) (Column 2) (Column 3)                                                      |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  |                   | ADDIT. FEE | <u></u>                                          |                            | ADDIT. FEE |                        |  |
| AMENDMENT B                                                                           |                                                                                                                                                                                                                                                                                                                     | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                        | HIGHI<br>NUME<br>PREVIO<br>PAID F | EST<br>BER<br>OUSLY | PRESENT<br>EXTRA |                   | RATE       | ADDI-<br>TIONAL<br>FEE                           |                            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
| MON                                                                                   | Total                                                                                                                                                                                                                                                                                                               | *                                         | Minus                                  | **                                | •                   | =                |                   | X\$ 9=     |                                                  | OR                         | X\$18=     |                        |  |
| MEN                                                                                   | Independent                                                                                                                                                                                                                                                                                                         | *                                         | Minus                                  | ***                               |                     | =                |                   | X43=       |                                                  | OR                         | X86=       |                        |  |
|                                                                                       | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                                                                                                                                                                                                                                                      |                                           |                                        |                                   |                     |                  | ┚┟                | +145=      | ·                                                | OR                         | +290=      | · <del></del>          |  |
|                                                                                       |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  |                   | TOTAL      |                                                  |                            | TOTAL      | •                      |  |
|                                                                                       |                                                                                                                                                                                                                                                                                                                     | (Column 1)                                |                                        | (Colum                            | nn 2)               | (Column 3)       | ,                 | ADDIT. FEE | •                                                | ,                          | ADDIT. FEE |                        |  |
| AMENDMENT C                                                                           | •                                                                                                                                                                                                                                                                                                                   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                        | HIGHE<br>NUME<br>PREVIO<br>PAID F | ST<br>BER<br>USLY   | PRESENT<br>EXTRA |                   | RATE       | ADDI-<br>TIONAL<br>FEE                           |                            | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|                                                                                       | Total                                                                                                                                                                                                                                                                                                               | *                                         | Minus                                  | **                                |                     | =                |                   | X\$ 9=     |                                                  | OR                         | X\$18=     | -                      |  |
|                                                                                       | Independent                                                                                                                                                                                                                                                                                                         | *                                         | Minus                                  | ***                               |                     | =                |                   | X43=       | ·                                                | OR                         | X86=       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                        |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  |                   | +145=      |                                                  | ì                          | +290=      |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                                                                                                                                                                                                                                                                                                     |                                           |                                        |                                   |                     |                  |                   |            |                                                  |                            |            |                        |  |
| ***                                                                                   | ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                           |                                        |                                   |                     |                  |                   |            |                                                  |                            |            |                        |  |